

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J. L.		5/13/99
O.I.P.E. CLASSIFIER		17	5/15/99
FINALITY REVIEW	4476	108931	5/16/99

### INDEX OF CLAIMS

✓ ..... Rejected  
 " ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	9/28/01
2	✓	✓	7/11/02
3	✓	✓	12/14/02
4	✓	✓	3/27/03
5	✓	✓	9/8/03
6	✓	✓	9/8/03
7	✓	✓	9/8/03
8	✓	✓	9/8/03
9	✓	✓	9/8/03
10	✓	✓	9/8/03
11	✓	✓	9/8/03
12	✓	✓	9/8/03
13	✓	✓	9/8/03
14	✓	✓	9/8/03
15	✓	✓	9/8/03
16	✓	✓	9/8/03
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18	✓	✓	9/8/03
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43	✓	✓	9/8/03
44	✓	✓	9/8/03
45	✓	✓	9/8/03
46	✓	✓	9/8/03
47	✓	✓	9/8/03
48	✓	✓	9/8/03
49	✓	✓	9/8/03
50	✓	✓	9/8/03

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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